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From risk to resilience

The therapeutic ethos in youth education

*Kristiina Brunila**

This article considers the rise of therapeutic education in Finland, a phenomenon already acknowledged in Europe, Canada and the United States. In Finland, the therapeutic ethos has been assimilated into educational policies and practices, but the shift to therapisation and especially its consequences have attracted little interest in critical educational research. This article is based on a Foucauldian discourse-analytic methodology and on a previous empirical study. It emphasises the effects of therapeutic interventions in education and focuses on project-based educational practices that deal with young adults who are on the margins of society. The central argument is that therapeutic interventions force young adults to focus more on themselves and lead to an internalisation of the idea that societal problems such as unemployment, a lack of education or criminal behaviour are in fact individual-based.

Keywords: therapisation, young people, subjectification, discursive research

Introduction

According to Kathryn Ecclestone and Dennis Hayes, concerns about the purpose of education obscure a profound crisis of meaning which is producing a serious change: the dangerous rise of therapeutic education, with far-reaching implications for educational goals and practices (Ecclestone & Hayes, 2009). In Finland, educational policies and practices have adopted therapeutic aims such as improving self-esteem and talking about emotions, diagnoses, syndromes, addictions, traumas and low self-esteem. In kindergartens and schools, counsellors, therapists and coaches are available whenever a child or student faces a problem. The rise of therapeutic education has already been acknowledged in Europe, Canada and the United States (Ecclestone et al., 2009; Ecclestone, 2007; Furedi, 2004). Therapisation is understood here to refer to the rise of a psycho culture (Kivivuori, 1992), positive psychology (Ecclestone et al., 2009) and diagnosing (Harwood, 2006; Burman, 2008; Teittinen, 2011), leading to the popularisation and increase of interventions for mental health and emotional well-being, activities to raise self-esteem, emotional and psychological support as well as counselling and mentoring (Ecclestone et al., 2009).

In this article the wider focus is on the effects of therapeutic interventions in education, and the specific interest is in project-based educational practices that affect

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young adults who are on the margins of education, working life and society at large. The objective is to examine the ways in which the therapeutic ethos in the policies and practices of education related to young people construct the object and subject of education. The article's research is based on data produced in my post-doctoral study on the marketisation, projectisation and therapisation of education that focuses on the education, guidance and rehabilitation offered to young adults who are seen to be at risk of social exclusion. Using examples drawn from the project documents and interviews, I will discuss how young people as targets of therapeutic interventions are viewed by professionals, and how therapeutic practices such as diagnosis and emotional work are used. Finally, I will disclose what these techniques offer to young adults as a way of functioning in society. The research questions are as follows: 1) Which types of politics and practices does the therapeutic ethos represent? 2) How does the therapeutic ethos meet the interests of young adults? 3) What kind of agency is available for young people within the therapeutic ethos as well as in terms of further education and employment?

The rise of therapisation in young adults' education

A therapeutic ethos is permeating the entire education system in Finland (e.g., OPH, 2010a/b). Therapeutic ideas and practices have been intensified in contexts such as project-based education that has rapidly increased under new governance (Lindblad & Simola, 2002), EU programmes and the marketisation of the public sector (Hansson & Lundahl, 2004; A 2009; 2011), in addition to the more traditional support systems within education such as kindergarten and special education.

Youth unemployment (in Finland at 27%) is considered a problem at the national and European Union policy levels. In 2008, almost 60,000 young people (15–29 years) in Finland were outside educational or working life and 52,000 were unemployed (Myrskylä, 2011). In Europe, more than one-third of all young people are not in education, employment or training (Commission of the European Communities 2009). In all EU countries, investments have been made to reintegrate young adults considered at risk into education and employment.

These reintegration activities have mostly been publicly-funded educational projects (see e.g., Commission of the European Communities, 2007; 2009; Hansson & Lundahl, 2004). Their main aim has been to improve the life-management skills as well as further education and employment possibilities of youth at risk. In Finland, young adults considered at risk are obliged to take part in publicly-funded and mandatory educational projects from a post-compulsory transition point (OPM, 2009; TEM, 2009; VM, 2010). The view that these individuals considered at risk should be managed more closely has created hundreds of publicly-funded educational youth projects which have simultaneously created new professions such as learning professionals, coaches, mentors and evaluators (e.g. Kovácha & Kučerova, 2009; Rantala & Sulkunen, 2006).

These professionals work with young people in a market-oriented society, in educational activities that aim to be more inclusive and also affect the mindset. In education, the orientation has become relatively individualistic, emphasising a new kind of resilience with competence based on self-discipline and continuous self-development (Komulainen, Korhonen & Rätty, 2009; Siivonen, 2010). This article links individualisation to the rising ethos of therapisation in education (Ecclestone et al., 2009). Frank Furedi has argued that the whole Western culture has begun to make sense of human experience by interpreting behaviour through the highly individualised idiom of therapeutic discourse (Furedi, 2004). The main argument of the present article is that market-oriented policy with its alliance of therapeutic methods and projects forms a joint framework in education which produces consequences that need to be studied thoroughly.

Therapeutic interventions, such as those for mental health and emotional well-being as well as activities to build emotional and psychological support and raise self-esteem, have become more common in the educational policies and practices of a growing number of countries, including the United States, Australia, Canada and the European Union (e.g., Ecclestone, 2010; Furedi, 2004). The therapeutic ethos – using the language of disorder, addiction, vulnerability and dysfunction – has been prevalent not only concerning infants and children but also adults (c.f. Ecclestone, 2007; Ecclestone, Hayes & Furedi, 2005; Furedi, 2004; Burman, 2008; Harwood, 2006). Rooted in different branches of therapeutic, psychological and psychiatric practice and having different psychological rationales and claims, emotionally and psychologically-oriented interventions have recently become more prevalent in legal systems, humanitarian and aid interventions and social policies (Ecclestone et al., 2009; Furedi, 2004).

Educators have already noted individually targeted therapeutic interventions such as psycho-emotional learning responses, interventions to improve emotional well-being, and raising children's and students' self-esteem (Burman, 2008; Harwood, 2006; Ecclestone et al., 2009; Ecclestone, 2007; Ecclestone et al., 2005). Several researchers have voiced concerns about therapisation's consequences such as the individualisation of societal problems and the consideration of children, students and adults as vulnerable and fragile instead of capable (Burman, 2008; Harwood, 2006; Ecclestone et al., 2005, 2009). Some researchers argue that mass education is underpinned by an expanded and increasingly expensive "SEN Industry", a term used by a number of professionals and practitioners who work with lower-attaining and 'special needs' students who are the focus of attention of special educators and behavioural specialists as well as psychological, medical, therapeutic and other professionals (Tomlinson 2010; in press). In Finland, this phenomenon has not been studied extensively (however, see Kivivuori, 1992; Teittinen, 2011). The aim here is not to criticise psychology as a science; instead, the objective is to determine the ways in which our culture and particularly the domain of education popularises

psychology in its politics and practices. For example, according to Janne Kivivuori (1992), psycho-culture means every day life's psychologisation to such an extent that people talk about their lives using concepts derived from psychological science.

Therapisation as a disciplinary and productive form of power (Foucault, 2000) does not turn its targeted individuals into passive objects; rather, it cannot work unless these people are capable of action. In order to understand why therapisation works and why individuals end up acting as they are supposed to, I have utilised the concept of subjectification derived from Michel Foucault (e.g., Foucault, 1977, 1982) and further developed by several educators (e.g., Davies, 1998; Davies, Dormer, Gannon, Laws, Rocco, Lenz Taguchi, & McCann, 2001). Subjectification refers to the construction of a subject and to the dialectical relationship between the mechanisms of power and exercise of power. In terms of therapisation, it means a process to which we are subjected, and in which we actively take up the terms of our subjection as our own. As a form of therapisation it involves individuals adopting the discourses used by people involved in project work, and using them as if they were their own. Through these discourses, people become speaking subjects at the same time as they are subjected to the constitutive force of the discourses.

Research Data and Analysis

In 2010 I collected and analysed policy documents from the Finnish National Board of Education and the Ministry of Education and Culture as well as educational projects in the Helsinki metropolitan area (mostly EU-funded). I took notes on the projects' activities, weekly schedules, teaching material and training. I also interviewed 10 project workers who deal with young adults and 22 young adults (17–30 years) who have taken part in these projects. These young adults were considered to be at risk of social exclusion and eight had a criminal background. In this article I mostly use selected extracts from policy documents and interview transcripts because they best describe how the therapeutic ethos works in practice.

By project I mean one that is publicly-funded (by the EU, ministries, foundations or associations) and which usually operates outside the formal education system of the Finnish National Board of Education, together with others constituting a separate system. Youth projects have certain predetermined goals such as promoting employment, further education and life-management skills for young adults. They offer short-term (from three months to one year) education, guidance and rehabilitation to young people who are outside of working life and education. These projects are usually mandatory and operate at the transition point, which refers to the stage between compulsory and post-compulsory education.

It is important that human subjects are fully aware of the goals, purposes, results and forms of dissemination of the research in which they participate. Accordingly, special attention was paid to ethics, taking questions of honesty, accountability and responsibility into consideration. Anonymity was guaranteed by using pseudonyms

and changing the context whenever necessary. Before the interviews, the research aims and measures to secure anonymity were also discussed.

The article is based on Foucauldian discourse theory and a discourse-analytic approach. As an analytical tool I used the concept of discourse not only as speech and writing but also as a productive and regulative practice having material effects (Foucault, 1977). According to Foucault (1980, 2000), power and knowledge are always found embedded together in the discursive regimes of truth. Discourse is a way of representing knowledge about a particular domain at a particular historical moment. It defines the domain and produces the objects of knowledge within that domain (Edwards, 2008, 23). I have chosen not to mention the names of the projects; instead of paying critical attention to individual projects I wanted to emphasise that rather than who is speaking, it is important to analyse what is said and done. This has been a central point of my analysis of discursive power.

I studied the therapisation of activities in terms of discursive power by acknowledging the relation between discourse and power in project work as productive and regulative (Foucault, 1977; Davies, 1998). This kind approach enabled me to see how the forms of power work and which effects they have on how one ought to speak in order to be heard. My discursive research also included ethnographical elements. Ethnography is used here as a research process theory that informs the study's methodological solutions (Lappalainen, Hynninen, Kankkunen, Lahelma & Tolonen, 2007). Further, ethnography is seen here as research on and in project-centred education based on participant observation and interviews.

Towards the therapisation of education

In the project, the prevention of alienation and development of practices for supporting students' self-esteem were the aims. (Report from a project that promoted healthy self-esteem and life-management skills in the comprehensive school, funded by the Finnish National Board of Education, 2001.)

A review of the policies of the Finnish National Board of Education or the Finnish Ministry of Education and Culture and their implementation, such as projects, reveals that policies and practices are discussed in a therapeutic context, i.e. in terms of psychological well-being, emotions, and emotional support. Particular attention is given to low self-esteem which is seen as a problem either of students who are not doing well in school or young people who are living outside of education and working life (see, for example, the Ministry of Education, 2007). In the curriculum of the National Board of Education, low self-esteem is understood as the lack of a skill that would enable individuals to take control of their lives, to learn new things and to function as active citizens (e.g., OPH, 2004). Indeed, the idea that people cannot emotionally cope with a range of encounters informs the way that therapeutic culture makes sense of the human condition (Furedi, 2004).

Emotional education means monitored activities that recognise the emotions. With the help of this a young adult may learn new ways of behaving and surviving. It can influence the forming of an individual's self-esteem, social skills, and morality. (Extract from a project in 2000 that aimed to enhance the emotional skills of boys through emotional education.)

Finland has a history of project-based emotional education, particularly for boys and young men (e.g. Mäkelä, 2010). My research data also dealt with emotional education. Most of the activities in the data were targeted at young men, which is not surprising because the public debate in this domain sees the risk of social exclusion and criminality as the problems of young men. The tendency in the projects was to redefine societal problems such as unemployment or school drop-out rates as a lack of ability to handle emotions:

Young adults who are seen in danger of alienation need support and intimacy. The importance of handling their feelings is crucial. (Youth project report, 2000)

Based on my document analysis, I have suggested that the activities of projects targeted at young adults represent various kinds of therapeutic interventions which can be described as emotional work (also see Hochschild, 1996). These activities included therapeutic discussions concerning emotional and psychological well-being, self-esteem and anxieties, as well as coaching and mentoring with respect to the subject's emotions. It seemed that in order to obtain funding project workers were concentrating on therapeutic and individual-based activities. It was therefore crucial to visit these projects and hear what the workers as well as the young people themselves had to say. I was interested in learning about their thoughts on the situation facing young people, their hopes, fears and future plans, how the project activities were meeting the young people's interests, and what was important in their lives.

Therapeutic interventions in young adults' education

I visited four educational projects that provided education, guidance and rehabilitation to young adults who were seen as being at risk of social exclusion. I also interviewed people who were working with these young persons. The project workers described the project activities which one worker, named Marja, referred to as "customer work", as is evident in the market-oriented discourse that follows:

Interviewer: What do you mean by customer work?

Project worker Marja: Customer work means two things: firstly, we map learning difficulties and then we aim to direct them (customers) to applied rehabilitation. I would say that these people are really challenging, they are really somewhere in deep. The main aim is to improve life management skills because our customers have so many learning difficulties.

Instead of educating, the main aim of the activities appeared to be related to therapeutic-driven rehabilitation. Project workers such as Marja above believed in the potential

of education to improve the lives of these young people, but they also said they had not been given enough resources to organise long-term educational courses. All the project workers appeared to be very much involved in working with young people and also in favour of education, but their resources for providing education were limited. One project worker mentioned that she believed in education's potential, but that the Ministry of Education was not interested in investing in these young people. The only resource they were given was short-term, project-based funding. In addition, the project workers also explained that their customers were not particularly interested in educating themselves.

The most common diagnosis of the participants in the educational programmes was ADHD, which in some cases had been acknowledged as correlating with criminality. For example, the following research finding estimates the prevalence of the most common psychic add-on symptoms that occur with ADHD:

Conduct disorder 10–55%, depression 15–75%, anxiety 10–40%, sleeping disorder, over 30%, criminality 20–30% (Michelsson, Miettinen, Saresma, Virtanen, 2001).

In the above estimate, not only are ADHD and criminality shown to correlate with each other, but criminality is also seen as a psychic phenomenon, as a mindset. ADHD was also the most common diagnosis in the projects I studied:

Project worker Ritva: If a customer is believed to have ADHD, we then take a look; we start from his early childhood. It is really challenging to find somebody who knew this person when he was a child. We are, of course, not licensed to conduct official diagnoses. But when a customer has done this test [the project developed its own test that measures concentration skills and learning difficulties], we write a statement that shows the test results and makes further recommendations.

During the project, before conducting any tests that may have indicated ADHD, the project worker collected as much information as possible about her customers. Information was gathered by interviewing people who had been involved with them. The project worker interviewed school teachers, kindergarten staff, relatives and social workers. This was done in order to gain an understanding of the customer and to help the customer with his or her problems. When enough statements were gathered the information was used to indicate which particular learning problems the customer had. The project worker was not licensed to make diagnoses, but instead employed tests that might indicate ADHD.

Valerie Harwood has acknowledged a clear shift in education, which she calls psychopathological. According to Harwood, diagnostic practices in particular are emphasised (Harwood, 2006, also see Conrad, 2006). In my data, diagnostic practices that resulted in diagnoses of, for example, ADHD were described as soothing and relieving to project workers without any critical attention (Conrad, 2006; Harwood,

2006; Graham, 2010). One project worker noted that she was aware of a possible correlation between ADHD and criminality, but she did not believe that ADHD determines criminality (also see, Siltanen, 2009). In addition to ADHD and criminality, other connections were also mentioned during the interviews:

Project worker Ritva: I don't know, but there might be a connection between a criminal lifestyle and failure at school, because there are so many kinds of learning difficulties.

Interviewer: You mean that there is some kind of connection between learning difficulties and criminal behaviour?

Project worker Ritva: Yes, yes, it looks that way.

Finding connections between a criminal lifestyle and learning difficulties was one of the less explicated aims of the project. As well as Ritva, other project workers I interviewed also seemed to look for answers in possible connections between criminality, school failure and low self-esteem:

Project worker Sirkka: Our customers usually think that they do not want to study anything; they feel they are not capable of studying. Of course, this is anchored in previous experiences of failure (in school) and their very low self-esteem. But then when we have conducted the tests (diagnoses of learning difficulties) and investigations then, wonder of wonders, believing in themselves begins to occur.

In the two extracts above, criminality is seen as the personal problem of an individual and in the second extract the diagnosis becomes a solution to this problem. The project worker in the latter extract also suggests that when young people receive a diagnosis (or an indication of a diagnosis) they begin to believe in themselves. Furedi has also stated that people have learned to demand such therapeutic measures in order to feel that they have been given enough attention by society (Furedi, 2004).

Consequently, a diagnosis of ADHD seems to ease the difficulty of dealing with society's problems and the behaviour of young people. According to Sally Tomlinson, in a number of countries more institutional measures, resources, funding and professional personnel are being directed towards the large number of young people described as low achievers, who have special needs, disabilities or learning difficulties, or may be disaffected or disengaged (Tomlinson, in press).

The mastery of and submission to therapisation

Therapisation works to render not only project workers but also young adults as their targets. I interviewed Teemu, in prison, and he explained the project-based activities in which he was taking part:

Then we had those emotion groups. They had planned questions or statements and then we discussed them, mentioned what came to our minds. And then there was one (project worker) who gave us some direction, what one should be thinking, and then of course we received feedback instantly (Teemu).

Teemu's extract could be considered as exemplifying the 'confession society' that has developed not only through education but also through society as a technology shaping and fostering certain kinds of activated and responsible citizens (see Dahlestedt & Fejes, 2011; Rasmussen, 2000). Therapisation works in the same way. As a form of power it regulates individuals so that one person, the young adult, confesses and is recognised, while the other, the project worker, hears the confession and reports it. According to the therapeutic ethos, not only project workers but also teachers and other professionals are given the task of functioning as experts capable of addressing fundamental questions such as identity and lifestyle choices (e.g. Rose, 1999).

Therapisation constitutes its subjects of power, as powerful subjects, and in terms of subjectification:

It (the project) gave me a good starting point. I was able to work with my emotions, and to express these feelings I had never been able to talk about before (Timo).

During the interviews with the young adults it became clear that therapeutic interventions operate by teaching individuals not only how to reproduce what is expected from them but also how to utilise these power relations. Timo, who had just been released from prison, considered the emotional work to be rewarding and as providing a good starting point for him afterwards. Riku, who was unemployed and had participated in an educational project, told me what he thought was the most important thing he had learned from the project:

Interviewer: If you think of this time period (in the project), what do you think has been important to you?

Riku: I have finally learned to believe in myself. Before I guess I did not believe enough, I had all kinds of problems, but luckily the project helped. I know it's all up to me; I can if I want.

Both Timo and Riku were eager to give a convincing image of themselves as active, developmental and self-disciplinary. These extracts represent the ideal kind of subjectification related to therapisation. Based on my research results, it appears that the ethos of therapisation makes young people more inward-looking and leads to an internalisation of the idea that societal problems such as unemployment, a lack of education or a criminal background are in fact individual-based. This teaches them that the solution to all types of problems such as unemployment, criminality, poverty or a lack of education is to be found in oneself.

Based on my research results, it could be argued that therapisation offers young adults a life in which they must learn to make their own choices and take responsibility, as well as learn to become developmental and trainable (see, for example, Filander, 2007; Ball, 2007, 2006). Tomlinson has argued that higher levels of education and training for all young people, including those with learning difficulties and disabilities, are required in order to successfully compete in a global economy. This has already led

to the growth of an industry devoted to special educational needs (a 'SEN industry') in England, Germany and the United States (Tomlinson, in press). The projects I have analysed could be viewed as forming part of the SEN industry Tomlinson refers to:

Interviewer: What do you think about society at the moment?

Ville: I don't think about it; I have not really considered society.

Interviewer: What about education or working life?

Ville: I really don't have any idea.

Interviewer: What do you think about society, here in prison?

Mika: It's too difficult to think here. Society feels so distant.

The greatest problem with therapeutic activities appears to be connected with the lack of societal perspectives. None of the projects I studied or project workers and young adults I interviewed considered the problems of unemployment, a lack of education or criminality to be societal in nature. All of the young adults, like Ville and Mika above, were asked about their thoughts concerning society, education and working life, and with only one exception they described society as distant, complex, troubling and unreachable.

It appears that therapeutic activities could be repeated endlessly. When a young person acts as expected, yet remains unable to enter education or working life, the problem can easily be reflected back on the individual because that is where the problem is always seen to originate. Societal problems become personal inadequacies. Consequently, terms such as low self-esteem, at risk of social exclusion, and fragile identity evoke a unique sense of powerlessness among young people (e.g., Ecclestone et al., 2009).

Conclusion

The central argument of this article is that the focus of therapeutic intervention seems to be on working towards an ideal individual who is flexible in accordance with the needs of the economy. Therapeutic methods and diagnoses seem to be gaining credibility and popularity in both Finland and elsewhere. In education, the rising ethos of therapisation has begun to explain not only behavioural but also societal problems such as social exclusion and unemployment. It is easy to agree that understanding internal life is important, but when education becomes preoccupied with the self it may easily lead to dismissing societal power relations as well as the social and cultural foundations of the individual.

The therapeutic ethos seems to be tempting because it appears to legitimise educational interventions that seek to ensure a more effective labour force for successful competition in the global economy and flexible, market-oriented individuals. Consequently, this privileging of emotions entails a redefinition of personhood. According to my results, the therapeutic ethos offers young adults a way of engaging a process

from risk to resilience, from understanding societal problems as personal problems and then learning the right act of submission and mastery, to carrying one's own choices and responsibilities as well as learning to become developmental and trainable. Therefore, the therapeutic ethos fosters an ideal in which the internal world of the individual becomes the site where the problems of society are raised (Furedi, 2004).

It is worth asking whether this interest in individual-based problems, diagnoses and correlations helps in understanding the problems young adults face in society today. Based on my results, I suggest that this might not be the case. Therapeutic interventions represent the success of an ethos that keeps young people busy concentrating on themselves and learning how to present themselves in the correct way. They learn how to make their own choices and take responsibility, and learn to become developmental and trainable. This drives young people to focus more on themselves and leads to the internalisation of the idea that societal problems and socio-economic realities are in fact individual-based. Within this discourse, youth unemployment or a lack of education leads to individual-based interventions. Self-esteem and emotional capacity become explanatory tools for understanding the world. Education, as well as autonomy concerning young adults, becomes limited to a question of learning how to speak according to what is expected of you.

The greatest problem is that therapisation appears to deprive young people of the opportunity to situate themselves in society, as capable human beings deciding their own futures. Because young adults' agency lies in their capacity to negotiate and adapt to the opportunities, challenges and restrictions they confront, it is important to critically examine both the potential and limitations that the therapisation of education offers. It is crucial to further analyse the therapeutic methods that are used in education, how these methods shape young adults' every-day lives and the kind of agency they provide in terms of planning the future, from the perspective of transitioning to further education and working life as well as functioning as citizens in society.

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